

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

Reset Form

<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1540
Logged In	
Scanned	
Computer	
Audited	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

IMPORTANT: Indicate by # type of committee you are reporting for: 1

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other  
Political Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political  
Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Ron Longmuir

Office Sought

Senate

Political Party (if applicable)

Republican

District (if Senate or House)

12

Late reports are subject to possible civil and criminal penalties.

Rosemary Longmuir  
SIGNATURE OF PERSON FILING REPORT

563-633-3891  
TELEPHONE

1-11-05  
DATE SIGNED

I AM FILING A October 29 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED October 29

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

### STATEMENT OF CASH ON HAND

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 4044.72

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 65526.00

Schedule F: Loans Received total (Attach Schedule F) ..... 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... 0

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** ..... \$ 69570.72

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... 65613.40

Schedule F: Loan Repayments total (Attach Schedule F) ..... 2000.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) (Attach DR-3) .....

\$ 1957.32

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ 0

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 19394.47

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ 0

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

☐ YES ☒ NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ 0

FOR INSTRUCTIONS, SEE BACK OF FORM

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

Reset Form

<b>SCHEDULE</b> <b>E</b> (Rev. 06/97)	<b>IN KIND</b> <b>CONTRIBUTIONS</b>
<input checked="" type="checkbox"/> <b>CHECK THIS BOX IF</b> <b>AMENDING FORM</b>	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/18/04	Republican Party of Iowa 621 East 9th St. Des Moines, IA 50309		postage	\$ 3,633.84	<input type="checkbox"/>
10/20/04	Iowa Farm Bureau Federation PAC 5400 University Ave. Des Moines, IA 50266-5997		mailing	3,112.53	<input type="checkbox"/>
10/22/04	Republican Party of Iowa 621 East 9th St. Des Moines, IA 50309		printing and radio ad	2,851.62	<input type="checkbox"/>
10/22/04	Republican Party of Iowa 621 East 9th St. Des Moines, IA 50309		mailing	3,382.44	<input type="checkbox"/>
10/22/04	Republican Party of Iowa 621 East 9th St. Des Moines, IA 50309		postage	6,331.87	<input type="checkbox"/>
10/26/04	National Federation of Independent Business PAC 1201 F St. NW Suite 200 Washington, DC 20004		letters	82.17	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 19,394.47	
TOTAL (If last page of this schedule)				\$ 19,394.47	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)

# DISCLOSURE SUMMARY PAGE



<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	1540
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Computer	
Audited	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

IMPORTANT: Indicate by # type of committee you are reporting for: ☒ (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name Ron Longmuir JAN - 4 2005 Political Party (if applicable) Republican  
Office Sought State Senate pm 12.30 District (if Senate or House) 12

Late reports are subject to possible civil and criminal penalties.

Rosemarie Longmuir  
**SIGNATURE OF PERSON FILING REPORT**

563-633-3891  
**TELEPHONE**

12-29-04  
**DATE SIGNED**

I AM FILING A October 29 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # ☒

☒ CHECK IF AMENDMENT TO REPORT DATED October 29

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

## STATEMENT OF CASH ON HAND

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) ..... \$ 4044.72

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 65526.00  
Schedule F: Loans Received total (Attach Schedule F) ..... 0  
Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... 0

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** ..... \$ 69570.72

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) .... 65613.40  
Schedule F: Loan Repayments total (Attach Schedule F) ..... 2000.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) (Attach DR-3) ..... \$ 1957.32

**\*UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ 0

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 9680.16

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ 0

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

☐ YES ☒ NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) ..... \$ 0

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Ron Longmuir For State Senate

SCHEDULE  
E  
(Rev. 06/97)

IN KIND  
CONTRIBUTIONS

☒ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/18/04	Republican Party of Iowa 621 East 9th Des Moines, IA 50309		Postage	\$ 3633.84	<input type="checkbox"/>
10/20/04	Iowa Farm Bureau Federation PAC 5400 University Ave. Des Moines, IA 50266-5997		Mailing	3112.53	<input type="checkbox"/>
10/22/04	Republican Party of Iowa 621 East 9th Des Moines, IA 50309		Printing and radiobad	2851.62	<input type="checkbox"/>
10/26/04	National Federation of Independent 1201 F St. NW Suite 200 Washington, DC 20004	Business	Letters	82.17	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$

9680.16

TOTAL (if last  
page of this  
schedule)

\$

9680.16

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE



<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	<u>1540</u>
Logged In	
Scanned	
Computer	
Audited	

S

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

IMPORTANT: Indicate by # type of committee you are reporting for: 1

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) County Candidate ( 7 ) School Board or Other  
Political Subdivision Candidate ( 8 ) County Candidate ( 9 ) School Board or Other Political  
Subdivision PAC ( 11 ) Local Ballot Issue Candidate

**CANDIDATE COMMITTEES ONLY**

Candidate Name

Ron Longmuir

Political Party (if applicable)

Republican

Office Sought

State Senate

District (if Senate or House)

12

NOV 18 2004  
PM 11-16  
FILED

Late reports are subject to possible civil and criminal penalties.

Rosemary Longmuir  
SIGNATURE OF PERSON FILING REPORT

563-633-3891  
TELEPHONE

11-15-04  
DATE SIGNED

I AM FILING A October 29 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED October 29

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election
County & Local Committees, enter County in which Election is held

### STATEMENT OF CASH ON HAND

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 4044.72

#### ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

65526.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL ..... \$ 69570.72

#### SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

65613.40

Schedule F: Loan Repayments total (Attach Schedule F)

2000.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$ 1957.32

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 0

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 6828.54

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 0

#### CANDIDATE COMMITTEES ONLY:

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

☐ YES ☒ NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ 0

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Ron Longmair for State Senate

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN KIND  
CONTRIBUTIONS

☒ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
✓ 10/18/04	Republican Party of Iowa 621 East 1 <sup>st</sup> St. Des Moines, IA 50309		Postage	\$ 3633.84	<input type="checkbox"/>
✓ 10/20/04	Iowa Farm Bureau Federation PAC 5400 University Ave. Des Moines, IA 50266-5997		mailing	3112.53	<input type="checkbox"/>
✓ 10/26/04	Nat. Federation of Independent Business PAC 1201 F St NW Suite 200 Washington, IA 20004		letters	82.17	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 6828.54

TOTAL (if last  
page of this  
schedule) \$ 6828.54

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1  
(for Schedule E)

**DISCLOSURE SUMMARY PAGE****COMMITTEE NAME** (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

**IMPORTANT:** Indicate by # type of committee you are reporting for: 1(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other  
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political  
Subdivision PAC (11) Local Ballot Issue**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Ron Longmuir

Office Sought

State Senate

NOV 5 2004

Political Party (if applicable)

Republican

District (if Senate or House)

FILED

PM 11-3

**FORM****DR-2**

(Rev. 07/2004)

DISCLOSURE

REPORT

**For Office Use Only**

Comm. #

1540

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties.

Rosemary Longmuir  
**SIGNATURE OF PERSON FILING REPORT**563-633-3891  
**TELEPHONE**11-2  
**DATE SIGNED**I AM FILING A October 29

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1☒ CHECK IF AMENDMENT TO REPORT DATED October 29☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

**STATEMENT OF CASH ON HAND****CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 4044.72

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

65526.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)**SUB-TOTAL** ..... \$ 69570.72**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)....

65613.40

Schedule F: Loan Repayments total (Attach Schedule F)

2000.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$ 1957.32

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D) ..... \$ 0**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) ..... \$ 5964.15**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) ..... \$ 0**CANDIDATE COMMITTEES ONLY:****CONSULTANT BREAKDOWN** (Schedule G Attached?)☐ YES☒ NO**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ 0

FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

<b>COMMITTEE NAME</b> (Must be same as on Statement of Organization) <u>Ron Longmuir for State Senate</u>	
IMPORTANT: Indicate by # type of committee you are reporting for: <u>1</u> (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party (4) County Central Committee (5) County School Board or Other Political Subdivision Candidate (8) County School Board or Other Political Subdivision PAC (11) Local Ballot Issue	
<b>CANDIDATE COMMITTEES ONLY</b>	
Candidate Name <u>Ron Longmuir</u>	Political Party (if applicable) <u>Republican</u>
Office Sought <u>State Senate</u>	District (if Senate or House) <u>12</u>

<b>FORM DR-2</b> (Rev. 07/2004)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. # <u>1540</u>	
Logged In <u>SW</u>	
Scanned <u>✓</u>	
Computer	
Audited	

Late reports are subject to possible civil and criminal penalties.

Rosemary Longmuir 563-633-3891 10-28-04  
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A October 29 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.  
(report date) Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election _____
County & Local Committees, enter County in which Election is held _____

### STATEMENT OF CASH ON HAND

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) .....\$ 4044.72

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) ..... 65526.00

Schedule F: Loans Received total (Attach Schedule F) ..... 0

Schedule H: Total Sales of Campaign Property (Attach Schedule H) ..... 0

(Schedule H applies to Candidates' Committees Only)

**SUB-TOTAL** .....\$ 69570.32

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below).... 65638.40

Schedule F: Loan Repayments total (Attach Schedule F) ..... 2000.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero) (Attach DR-3) .....\$ 1932.32

<b>*UNPAID BILLS</b> (From Schedule D - Attach Schedule D) .....	\$ <u>0</u>
<b>*IN KIND CONTRIBUTIONS</b> (From Schedule E - Attach Schedule E) .....	\$ <u>3112.53</u>
<b>**OUTSTANDING LOANS</b> (From Schedule F - Attach Schedule F) .....	\$ <u>0</u>

**CANDIDATE COMMITTEES ONLY:**

**CONSULTANT BREAKDOWN** (Schedule G Attached?) ☐ YES ☒ NO

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H) .....\$ 0



For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS



CHECK THIS BOX IF  
AMENDING FORM

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/15/04	ID# CK# 1081	Fayette Co. Rep. Central Committee 516 N. Frederick Ave. Oelwein, IA 50662-1244		\$ 450.00	<input type="checkbox"/>
10/15/04	ID# 6089 CK# 2215	Iowa Industry PAC 904 Walnut, Suite 100 Des Moines, IA 50309-8000		1000.00	<input type="checkbox"/>
10/18/04	ID# CK# 1192	Customized Newspaper Advertising 319 E 5th St. Des Moines, IA 50309		286.00	<input type="checkbox"/>
10/18/04	ID# CK# 1713	Barbara Jellings 12202 Bell Rd. Volga, IA 52077		15.00	<input type="checkbox"/>
10/18/04	ID# 6211 CK# 11940	NFIB - Iowa State Trust 1201 F St. NW Suite 200 Washington, DC 20004		250.00	<input type="checkbox"/>
10/19/04	ID# CK# wine transfer	Republican Party of Iowa 621 E 9th St. Des Moines, IA 50309		36,715.00	<input type="checkbox"/>
10/20/04	ID# C00331686 CK# 5179	Faraway Stores, Inc. PAC 2300 E 8th St. Boone, IA 50036		300.00	<input type="checkbox"/>
10/21/04	ID# 6056 CK# 3371	Bankers Unite in Legislative 8800 NW 62nd Ave. Johnston, IA 50131-6200	Decisions	1000.00	<input type="checkbox"/>
10/21/04	ID# 6155 CK# 4400	Taxpayers United PO Box 209 Muscatine, IA 52761-0069		5000.00	<input type="checkbox"/>
10/25/04	ID# 6082 CK# 1082	Mid American Energy Co. PO Box 657 Des Moines, IA 50303-0657		500.00	<input type="checkbox"/>
SUB-TOTAL				\$45516.00	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2  
(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/26/04	ID# CK# wire transfer	Republican Party of Iowa 621 E 9th Des Moines, IA 50309		\$ 19985.00	<input type="checkbox"/>
10/26/04	ID# CK# wire transfer	Republican Party of Iowa 621 E 9th Des Moines, IA 50309		25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 20010.00

TOTAL (If last page of this schedule)

\$ 65526.00

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 2 of 2  
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/19/04	ID# CK# wire transfer	Victory Enterprises 5200 S.W. 30th St. Davenport, IA 52802	TV ads	\$40395.00
10/20/04	ID# CK# 1071	The Arlington Market PO Box 86 Arlington, IA 50606	ad	35.00
10/21/04	ID# CK# 1072	Victory Enterprises 5200 S.W. 30th St. Davenport, IA 52802	TV ads	5000.00
10/22/04	ID# CK# 1074	Fayette County Union 119 S. Vine West Union, IA 52175	ad	158.40
10/26/04	ID# CK# wire transfer	Victory Enterprises 5200 S.W. 30th St. Davenport, IA 52802	TV ads	26025.00
10/26/04	ID# CK# wire transfer	Victory Enterprises 5200 S.W. 30th St. Davenport, IA 52802	reimbursement for wire transfer	25.00
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$65638.40
TOTAL (if last page of this schedule)				\$65638.40

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 1

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

Read Form

SCHEDULE <b>E</b> (Rev. 06/97)	IN KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/20/04	Iowa Farm Bureau Federation PAC 5400 University Ave. West Des Moines, IA 50266-5497		mailing	\$ 3112.53	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$  
3112.53

TOTAL (if last  
page of this  
schedule) \$  
3112.53

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of       
(for Schedule E)

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Ron Longmuir for State Senate

SCHEDULE

F

(Rev. 07/03)

LOANS  
RECEIVED  
& REPAY☐ CHECK THIS BOX IF  
AMENDING FORM

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 2000.00

## PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ 0

## PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E -- In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
10/21/04	Rosemary Longmuir 2754 110th St. Arlington, IA 50606	Wife	\$ 2000.00

TOTAL CASH REPAYMENTS (PART II) \$ 2000.00

From Schedule E -- TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 0

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.